

**Local Health Department (LHD) and MICHild Health Plan
Care Coordination Agreement for Children's Special Health Care Services
(CSHCS)**

This agreement is made and entered into this ____ day of ____ in the year ____ by and between MICHILD HEALTH PLAN Name (Health Plan) and LHD Name (LHD).

A. Legal Basis

The Michigan Department of Community Health (MDCH) is required to enroll children eligible for Children's Special Health Care Services (CSHCS) and MICHild into health plans on a capitated basis; and

Whereas, MICHild-covered CSHCS services will be provided through arrangements between the MDCH, (name of health plan) and (name of local health department); and

Whereas, MICHild Health Plans are mandated by the Michigan Department of Community Health/MICHild Health Plan contract, to communicate with all LHDs in the plans' service area to ensure coordination of care;

Whereas, LHDs are required by the MDCH/CSHCS contract, to establish and maintain coordination of care agreements with all MICHILD HEALTH PLANS in their jurisdiction;

Now, therefore, the MICHILD HEALTH PLAN and the LHD agree as follows:

B. Term of Agreement

This agreement will be effective month and day in the year _____. Agreement will be subject to amendment due to changes in the contracts between DCH and the MICHild Health Plan or between the MDCH and the LHD.

Upon signed agreement of both parties, the provisions of this agreement will be extended for a time frame consistent with the contract period of the MDCH agreements with MICHild Health Plans and LHDs for CSHCS. Either party may cancel the agreement upon 30 days written notice to MDCH and the other party.

C. Purpose and Administration

CSHCS MICHild enrollees qualify for the provision of benefits described in the CSHCS program requirements and covered in the MICHild Health Plan contract. The purpose of establishing a care coordination agreement between the MICHild Health Plan and the LHD is to assure service coordination and continuity of care for persons receiving services from both organizations. The explicit intent of this agreement is to describe the services to be coordinated and the essential aspects of collaboration between the MICHild Health Plan and LHD.

As required by the CSHCS section of the MICHild and the MDCH/LHD CSHCS contract, care coordination agreements between the LHDs and the MICHILD HEALTH PLAN will be available for review upon request from the MDCH.

D. Areas of Responsibility

Mutually Served Consumers

All CSHCS enrollees qualify for LHD services. This agreement refers to MICHild enrollees who also qualify for CSHCS services. The intent of establishing a written agreement between the MICHild Health Plan and the LHD is to assure service coordination and continuity of care for persons receiving services from both organizations.

Services Provided by MICHild Health Plan

The MICHILD HEALTH PLAN will provide MICHild covered services to enrollees as required by the MICHild Health Plan contract with the MDCH.

- The MICHild Health Plan will provide assessment, case management and care coordination services. The MICHild Health Plan will notify enrollees of the availability of LHD services.
- The MICHild Health Plan shall provide referral to the LHD for enrollees who require assistance with resources at the local level or request LHD services. Referrals can be made by letter, fax, electronically secure transmission, or by telephone.
- The MICHild Health Plan shall establish a process with the LHD to ensure communication on assessment, plan of care, care coordination, & updates to coordination services.

Services Provided by LHD

The LHD services are coordinated services provided to children enrolled in a MICHild Health Plan for the CSHCS Program. These coordinated services are to be provided by the LHD CSHCS Representatives or health professionals consisting of a qualified social worker or nurse.

- LHD staff provide ongoing educational and community resources in the local community to assist with the unique circumstances of the enrollee.
- The LHD provides the following services for CSHCS enrollees in coordination with the MICHild Health Plan and according to the process established with the MICHild Health Plan to prevent duplication of services:
 - Outreach and assessment
 - Plan of care development
 - Care coordination including assisting with health, social, educational or other support services
 - Facilitating transitional services for enrollees at age 19 with the appropriate MICHild Health Plan
 - Assistance with Children with Special Needs (CSN) Fund applications
 - Referral to community services

- In-state transportation authorization to covered services for CSHCS-eligible conditions
- Out-of-state transportation assistance to covered services for CSHCS-eligible conditions

E. Care Coordination

Both parties agree to establish a process to communicate on a regular basis; to review and update the plans of care; and report the status of mutually served consumers. Both parties will collaborate on an effective means of communicating the need for individual referrals.

The LHD will provide MiChild Health Plan with names of MiChild Health Plan enrollees receiving LHD services on a regular basis utilizing a standardized form. The MiChild Health Plan will provide the LHD with the names of the MiChild Health Plan enrollees receiving case management services following the agreed upon process.

The LHD will collaborate with the MiChild Health Plan or assigned primary care provider regarding recommendations for covered medical services on behalf of the MiChild Health Plan enrollees.

F. Quality Improvement

Both parties agree to have mechanisms in place to conduct Quality Improvement activities to monitor the coordination of services. The LHD and the MICHILD HEALTH PLAN shall participate in Quality Improvement Programs established by MDCH and provide data as requested to improve the quality of care for children with special healthcare needs.

G. Complaints, Grievance and Appeals

The MICHILD HEALTH PLAN and the LHD will share their grievance and appeal processes and appropriate contact information with each other.

The LHD is required to direct enrollees to MICHILD HEALTH PLAN's grievance and appeal process as appropriate. The MICHILD HEALTH PLAN is required to direct enrollees to the LHD's grievance and appeal process as appropriate.

The MICHILD HEALTH PLANS are required to report complaints, grievances and appeals to DCH. DCH/Managed Care Plan Division oversees quality assurance, monitors compliance and requires corrective action as needed.

G. Dispute Resolution

Both parties agree to participate in a dispute resolution process as defined by the MDCH in the event that the MICHILD HEALTH PLAN or the LHD contests a decision or action by the other party related to the terms of this Agreement.

J. Governing Laws

Both parties agree that performance under this agreement will be conducted in compliance with all federal, state, and local laws, regulations, guidelines and directives.

K. Signature

Signatures below designate the person who has authority to administer this agreement.

LOCAL HEALTH DEPARTMENT

Signature

Title

Date

Business Address

Business Telephone

MICHILD HEALTH PLAN

Signature

Title

Date

Business Address

Business Telephone